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Attention:	Attn: Group Art Unit 4191	From:	Travis Dodd
Fax:	571-273-8300	Fax:	818-833-2065
Phone:		Phone:	818-833-2014
Company:	U.S. Patent and Trademark Office	Company:	Quallion LLC
		Pages:	Total of (20) Pages
Re:	Application Serial No.: 10/810,081 Title: ELECROLYTE INCLUDING POLYSILOXANE WITH CYCLIC CARBONATE GROUPS Filed: March 25, 2004 Examiner: BEST, Zachary Group Art Unit: 4191 Attorney Docket No.: Q199-US1		
Date:	April 2, 2008		

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Amendment Transmittal Letter (2 pages)
Fee Transmittal (in duplicate) (2 pages)
Amendment (15 pages)

Lisa K. Robbins
(Name of Person Signing Certificate)


(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065


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PAGE 1/20 * RCVD AT 4/2/2008 7:46:37 PM [Eastern Daylight Time] * SVR:USPTO-EFAX-4/16 * DNIS:2738300 * CSID:8188332065 * DURATION (mm-ss):04-58

APR 02 2008

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/810,081
		Filing Date	March 26, 2004
		First Named Inventor	Robert West et al.
		Group Art Unit	4191
		Examiner Name	BEST, Zachary
Total Number of Pages In This Submission		Attorney Docket Number	Q199-US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> Amendment Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
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Customer Number or Bar Code Label	31815 <i>(Insert Customer No. or Attach bar code label here)</i>
The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.	
Respectfully submitted,	
Dated: 04/01/2008 Phone: (818) 833-2003 Fax: (818) 833-2065	By:  Travis Dodd Attorneys for Applicant(s) P.O. Box 923127 Sylmar, CA 91392-3127

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Typed or printed name	TRAVIS DODD		
Signature		Date	

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Respectfully submitted,

Dated: 04/01/2008

 Phone: (818) 833-2003
 Fax: (818) 833-2065

By:


 Travis Dodd
 Attorneys for Applicant(s)
 P.O. Box 923127
 Sylmar, CA 91392-3127

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FEE TRANSMITTAL

Attorney Docket No.	Q199-US1
First Named Inventor:	WEST, Robert et al.
Application Number	10/810,081
Filing Date:	March 25, 2004
Examiner Name:	4191
Group/Art Unit:	Best, Zachary

TOTAL AMOUNT OF PAYMENT:	\$.00
METHOD OF PAYMENT (check One)	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other - Credit Card</p>


2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$310.00	\$155.00	\$0.00
Total Claims	60 - 65 =	0	X \$50.00	X \$25.00	\$0.00
Independent Claims	4 - 8 =	0	X \$210.00	X \$105.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$370.00	\$185.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 210.00	\$ 105.00	\$0.00
Reissue filing fee	\$ 310.00	\$ 155.00	\$0.00
Provisional filing fee	\$ 210.00	\$ 105.00	\$0.00
Total of above Calculations =			\$0.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	04/01/2008

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	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	04/01/2008

PATENT
DOCKET NO. Q199-US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:
WEST, Robert C. et al.

Serial No.: 10/810,081

Filed: March 25, 2004

For: ELECROLYTE INCLUDING
POLYSILOXANE WITH CYCLIC
CARBONATE GROUPS

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: Examiner: Best, Zachary
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: Art Unit: 4191

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AMENDMENT AND REQUEST FOR RECONSIDERATION

This communication is in response to the Office Action mailed March 5, 2008.